Request and Authorization for Release of Transcript

Student ID R  __  __  __  __  __  __  __  __

Date of Birth __ __ __

Maiden or Previous Name

Date of Request __ __ __  No. of copies __

To Be Sent: (   ) Now (   ) End of Term (   ) After degree is posted (   ) Student copy (for personal use) (   ) Official

This form is to be used for the release of the permanent academic record of any student to any party other than those listed in Section 99.30 of the Family Educational Rights and Privacy Act (Public Law 93-380).

Date released _____________  By __________ (initials)

EDI sent _____  Fax sent _____  EDI and Mailed _____  Mailed ______

Fee: A charge of $2 each will be assessed for request totaling more than ten (10) in any term.

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